2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000003540

Entity Name: CHRISTIAN'S CHURCH BY GRACE, INC.

FILED Mar 12, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1464 SW 12 AVE 1464 SW 12 AVE

POMPANO BEACH, FL 33060 POMPANO BEACH, FL 33060 23

Current Mailing Address: New Mailing Address:

4621 NE 6 AVE

OAKLAND PARK, FL 33334

FEI Number: 04-3691668 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

TERNIVAL, JEAN W TERNIVAL, JEAN W 1151 NE 16TH CT #3 4621 NE 6 AVE.

FT LAUDERDALE, FL 33305 US OAKLAND PARK, FL 33334 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: PATOR JEAN TERNIVAL 03/12/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

 Name:
 TERNIVAL, JEAN W

 Address:
 502 NW 7TH TERR

 Address:
 4621 NE 6 AVE.

City-St-Zip: FT LAUDERDALE, FL 33311 City-St-Zip: OAKLAND PARK, FL 33334

Name: TERNIVAL, MARIE M
Address: 502 NW 7TH TERR
Address: 4621 NE 6 AVE.

City-St-Zip: FT LAUDERDALE, FL 33311 City-St-Zip: OAKLAND PARK, FL 33334

Title: D () Delete Title: () Change () Addition

Name: ARREY, DAWN M Name:

 Address:
 221 NW 46 CT
 Address:

 City-St-Zip:
 POMPANO BEACH, FL 33064
 City-St-Zip:

Title: S () Delete Title: () Change () Addition

 Name:
 MILLER, LISÀ H
 Name:

 Address:
 190 SW 10TH ST
 Address:

 City-St-Zip:
 DEERFIELD BEACH, FL 33441
 City-St-Zip:

Title: D () Delete Title: () Change () Addition

 Name:
 AUGUSTE, JOSEPH
 Name:

 Address:
 2806 NW 5TH CT
 Address:

 City-St-Zip:
 FORT LAUDERDALE, FL 33313
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAWN ARREY D 03/12/2009